2003 Fall Youth Sports Registration Form

Please mark below the sport(s) you are registering for.

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Spike Th Practice: Fees:	e Rock Youth Volleyball Leag Thursdays 6-8pm \$65R/\$70NR/\$75 after 9/19	Games: Sundays 1hr i	match
Slap The Practice: Games:	Rock In-Line Hockey League Tues. Under 18's-6:00-7:15, Thurs Sundays 1hr. games between 2-9pm	sUnder 1 <mark>0's-5:30-6:30, Un</mark>	der 13's-6:30-7:30
Junior Al Days & Time	ll Star Flag Football es: Tuesdays 6:00-7:00pm	<u>September 16-O</u> Fees: \$45R/\$50NR	
	ll Star Basketball es: Tuesdays 6:00-7:00pm	November 4-Dec Fees: \$45R/\$50NR	
OElementa	ll Tournament ry Team(4-6th) OJr. High Tear me:	•	n OAdult Team
NFL Flag Football requires a separate registration form. *Parent or legal guardian must complete this form in its entirety.			
Name (Last/First):		A	ge:DOB:
School:			Grade:
 Parents Names :_			
Address:		City:	Zip:
Phone (Home): _	Work:	Cell:	
e-mail:			T-shirt Size:
Emergency Contact Name:Phone:			
In consideration for being permitted by the City of Rocklin to participate in the above activity (ies), I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I or my child (if participating) may have, or which hereafter accrue to me, or my child, against the city as a result of my or my child's participation in the activity (ies). This release is intended to discharge the city, its officers, officials, employees and volunteers, and any other involved public agencies from and against any and all liability arising out of or connected in any way with my of my child's participation in the activity, even though that liability may arise out of the negligence or carelessness on the part of the persons or public agencies mentioned above. I further understand that accidents and injuries can arise out of the activity (ies); knowing the risks, nevertheless, I hereby agree to assume those risks and to release and to hold harmless all of the persons or agencies mentioned above who (through negligence or carelessness) might otherwise be liable to me, or my child (or my or my child's heirs or assigns) for damages. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my and my child's heirs and assigns. In addition, I agree to indemnify and hold harmless city and its officers, officials, employees and volunteers from and against all claims, damages, losses and expenses including attorney fees arising out my or my child's participation in the activity (ies) described above, caused in whole or in part by my or my child's negligent act, except where caused by the active negligence, sole negligence, or willful misconduct of the city. HAVE CAREFULLY READ THE ABOVE RELEASE & INDEMNITY AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND AGREEMENT TO INDEMNIFY THE CITY AND I SIGN IT OF MY OWN FREE WILL.			
	nt (if under 18, Parent or Guardian)		Date
Amount: For :	Rec:Che more information please call Roo	ck #:Date: cklin Community Services	By: at 625-5200.